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transmitted to the USPTO (571) 273-2885, on the date indicated below. BANNER & WITCOFF 1001 G STREET N W **SUITE 1100** WASHINGTON, DC 20001 (Signature (Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 12/19/2003 10/631 958 Sophia Kossida 004974.00951 3681 TITLE OF INVENTION: REGULATION OF HUMAN CERAMIDE KINASE SMALL ENTITY ISSUE FEE APPLN, TYPE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE NO \$1400 nonprovisional \$300 \$1700 12/27/2005 EXAMINER ART UNIT CLASS-SUBCLASS MONSHIPOURI, MARYAM 1653 536-023200 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Banner & Witcoff, Ltd. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. 12/29/2005 MBEYENE2 0000031 190733 10631958 (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STA TE OR COUNTRY) 01 FC:1501 1400.00 DA Leverkusen, Germaniz FC:1504 Bayer Aktiengesellschaft 300.00 DA Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🔲 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): 🛚 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card, Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0733 (enclose an extra copy of this form). ☐ Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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